

**WOLVERHAMPTON CLINICAL COMMISSIONING GROUP GOVERNING BODY**

Minutes of the Governing Body Meeting held on Tuesday 12 January 2016  
Commencing at 1.00 pm at Wolverhampton Science Park, Marston Room

**VOTING MEMBERS ~**

<b>Clinical ~</b>		<b>Present</b>
Dr D De Rosa ~ Chair	Board Member	Yes
Dr D Bush	Board Member	Yes
Dr M Kainth	Board Member	Yes
Dr J Morgans	Board Member	Yes
Dr R Rajcholan	Board Member	Yes
Dr A Sharma	Board Member	Yes
<b>Management ~</b>		
Dr H Hibbs	Chief Officer	Yes
Ms M Garcha	Executive Lead for Nursing and Quality	Yes
Mr S Marshall	Director of Strategy and Transformation	Yes
Ms C Skidmore	Chief Financial Officer/Chief Operating Officer	Yes
<b>Lay Members/Consultant ~</b>		
Mr T Fox	Secondary Care Consultant	Yes
Mr J Oatridge	Lay Member	Yes
Ms P Roberts	Lay Member	Yes
Ms H Ryan	Lay Member	Yes

**In Attendance ~**

Dr M Chirgwin	Strategic Lead for Primary Care Development
Ms K Garbutt	Administrative Officer
Mr M Hastings	Associate Director of Operations
Ms R Jervis	Public Health Director
Mr P McKenzie	Corporate Operations Manager
Dr A Sen	Health Watch Representative - Wolverhampton
Ms A Smith	Head of Integrated Commissioning

### **Apologies for absence**

No apologies were received.

### **Declarations of Interest**

WCCG.1344 Dr D De Rosa reported there were no declarations of interest.

RESOLVED: That the above is noted

### **Patient Story**

WCCG.1345 No patient story took place.

RESOLVED: That the above is noted.

### **Minutes**

WCCG.1346 RESOLVED:

That the minutes of the Wolverhampton Clinical Commissioning Group Governing Body meeting held on the 8 September 2015 be approved as a correct record. However the following amendments were highlighted ~

#### **In Attendance**

Dr A Sen stated this should read Dr A Sen – Health Watch Representative Wolverhampton.

#### **Minute Number 1308 Infant Mortality Scrutiny Review**

Dr A Sen pointed out that he made a point “there needs to be adequate consideration for ethnic minorities”.

#### **Minutes Number 1307 Chief Officer update**

Ms P Roberts asked when a report would be brought back to the Governing Body relating to discussions with the Royal Wolverhampton Trust (RWT). Dr De Rosa confirmed this will take place in February or March 2016.

### **Matters arising from the minutes**

WCCG.1347            There were no matters arising from the minutes.

RESOLVED: That the above is noted.

### **Committee Action Points**

WCCG.1348            RESOLVED: That the progress report against actions requested at previous Board meetings be noted

### **Chief Officer update**

WCCG.1349            Dr H Hibbs presented the Chief Officer report which is submitted to provide assurance to the Governing Body of robust leadership across the Clinical Commissioning Group (CCG) that involves patients and the public and works in partnership.

Dr Hibbs highlighted the Young Peoples Takeover Day which had taken place in November 2015. Three young leaders were invited to join Wolverhampton CCG, taking over the roles of the Chair of the Governing Body, Accountable Officer and Director of Strategy and Transformation. The young leaders had carried out an excellent job. It was a very useful experience for the CCG and the young people.

Dr Hibbs referred to item 2.9 Strategic Alignment. In conjunction with Human Resources, the CCG has carried out a strategic alignment exercise to ensure that the capacity and capability of the management team aligns to the developing requirements of the organisation. The overarching finding was that the current structure is largely effective with no major design flaws. It was, however, recommended that a post of Associate Director of Operation is created. Mike Hastings has been appointed to this role and Dr Hibbs welcomed him to the Governing Body Meeting.

RESOLVED: That the above is noted.

## **Interim Chairing Arrangements for Finance and Performance Committee**

WCCG.1350 Dr De Rosa stated that due to Dr Handa resigning from the Governing Body due to ill health, there is a vacancy on the Governing Body. There is also a vacancy for Chair of the Finance and Performance Committee.

Mr P McKenzie introduced the report which sets our recommendations for managing the vacancy of Chair of the Finance and Performance Committee by appointing Dr David Bush as Interim Chair and seeking to make contingency arrangements to cover the South West Locality. He gave an overview of the report.

Dr A Sharma asked if the South West Locality chair could not be filled who would be carrying this out. Dr De Rosa confirmed he would then carry this role out on a temporary basis.

Mr McKenzie confirmed there will be a by-election at the beginning of the financial year to fill the vacancies on a permanent basis.

RESOLVED: That the Governing Body agreed to the appointment of Dr David Bush as Interim Finance and Performance Lead and Chair of the Finance and Performance Committee. The Governing Body also agreed to recruit an interim Locality Lead for the South West Locality.

## **Primary Care Strategy**

WCCG.1351 Dr M Chirgwin presented the Primary Health Care Strategy report. She added that the Strategy will be presented and discussed at the Members Meeting on the 20 January 2016. If the meeting is supportive the Strategy will become formally approved. If there is significant dissent or significant changes need to be made the Strategy will be brought back to the Governing Body meeting in March 2016 for final approval.

She requested that the Strategy is approved in principle. If there are any changes today these will be actioned prior to it going to the Members Meeting. She pointed out that some small changes have been made to the original draft and section 5 of the report is where we are now. Several meetings have taken place regarding outcomes relating to the Strategy. She gave an overview of the outcomes and new areas within the document.

Ms R Jarvis referred to section 4 highlighting that disability quality of life should be included. She also suggested that milestone indicators are included within the Strategy. Dr Chirgwin confirmed she is happy to work with Public Health. Dr Sharma referred to section 7.7 and asked how

many GPs were involved in developing the points. Dr Chirgwin confirmed GPs had been involved in 3 separate meetings. Dr Sen pointed out should there have been a declaration of interest at the start of the meeting due to named people within the document. Dr De Rosa confirmed that there is no conflict as this is a Strategy.

Dr J Morgans arrived

Dr Sen pointed out that a letter had been disseminated to the CCG raising some issues and highlighted 2 points ~

- The areas defined by indices
- There was not adequate involvement; more people should have been involved at an earlier stage

Dr De Rosa confirmed that these points will be taken on board. Dr H Hibbs added this is a draft and living document. There is the need to be flexible and the CCG are moving in the right direction. Dr Sen added that inequalities have not been looked at. Dr Chirgwin stated that the Strategy is the first step to respond to health equalities.

Ms P Roberts stated that the document was acceptable as a draft but had reservations regarding equality. She would like to see the equality impact assessment. She also felt the need for consultation regarding all 3 models. Mr S Marshall confirmed that no consultation is required as there is no service change. Dr De Rosa confirmed that if there are service changes then consultation will take place. Dr Hibbs confirmed that the document has been shared with the Acute Trust.

Dr De Rosa thanks Dr Chirgwin for the work carried out and we now need to implement this document. We need a strategy that works in Wolverhampton. He also supported Ms Jervis comment that milestones should be included.

**RESOLVED:** That the Governing Body approved the Primary Health Care Strategy in principle. If there is significant dissent or significant changes need to be made to the Strategy this will be brought back to the Governing Body meeting in March 2016 for final approval.

### **Review of Procedures of Low Clinical Value (PoLCV)**

WCCG.1352

Ms Skidmore presented this report which relates to the outcome of the mid-year review of the Procedures of Low Clinical Value policy and seek approval of the changes from the Governing Body. She added that Dr Kamran Ahmed has carried out work on the development of this policy. Ms Skidmore highlighted the changes under section 2 of the report.

A discussion took place and the following points were raised ~

- What is the risk if a GP refers against the PoLCV
- There should be an appendix relating to individual funding request.
- On page 16 of the report a bullet point is missing
- If there are more individual funding requests the policy is not being followed
- Experience regarding patients should be shared
- Mr Tony Fox asked for an audit of individual funding requests and the application of the policy to be carried out to inform how well it is working

Ms Skidmore stated that a report will be taken to the Quality and Safety Committee.

RESOLVED: That the Governing Body approved the changes already made to the policy. That a further report is taken to Quality and Safety Committee regarding the points raised.

### **Better Care Fund update**

WCCG.1353

Ms A Smith presented agenda item 11 which was to update the Governing Body. The Better Care Fund Programme consists of 4 work streams, all with plans for developing integrated health and social care pathways to improve patient/services user experience and create efficiencies. The programme is now in the implementation phase with the aim of delivering 6 outcomes. Ms Smith gave an overview of the outcomes within the report on page 3 – 4.

Ms Smith stated that RWT have recruited additional staff and are also using existing staff. She pointed out that the Primary and Community Care work stream are developing and implementing a Community Neighborhood Team (CNT) model. This model will see 3 CNT's wrapped around small numbers of GP practices. The core teams will include Community Matrons, District Nurses and Social Workers. Each practice will receive a letter identifying the relevant names of their core teams.

Ms Roberts felt more assured regarding the Better Care Fund and thanked Ms Smith. She queried the times for the pilot service on page 5. Ms Smith confirmed this should read from 9.00 – 3.00 pm.

RESOLVED: That a further report will be brought back to the Governing Body in March 2016.

Ms A Smith left

### **Commissioning Committee**

WCCG.1354 Dr J Morgans presented the Commissioning Committee report which is an update. He highlighted the percentage of A&E attendances where the patient was admitted transferred or discharged within 4 hours.

Ms Roberts asked if British Sign Language (BSL) will be separate to the Interpreting Services procurement. Ms Skidmore confirmed this is currently in the contract and will be picked up in the procurement process. Mr Marshall reported that work will be carried out relating to the re-referring of patients with long term treatment.

RESOLVED: That the above is noted.

### **Quality and Safety Committee**

WCCG.1355 Dr Rajcholan presented the report which provides assurance on Quality and Safety of care and any exception reports that the Governing Body should be sighted on. She highlighted the key issues of concern for noting. Dr Rajcholan referred to the Quality Performance Indicators relating to Referral to Treatment. Dr Hibbs pointed out that the target is now only around incomplete episodes of referral to treatment.

Ms M Garcha stated that at the Quality and Safety Committee, which took place today, there are 3 risks which have been on for a long time and these will be reviewed. Dr De Rosa requested that at future meetings if the report could be presented assuming Governing Body members have read it and only the significant issues highlighted briefly so that the Governing Body could then debate the key issues as read and then take any questions at the meeting.

RESOLVED: That the above is noted.

### **Finance and Performance Committee**

WCCG.1356 Ms Skidmore presented the summary. She reported that the CCG are on target and Quality, Innovation, Productivity and Prevention (QIPP) delivery is running on forecast.

RESOLVED: That the above is noted.

### **Communication and Engagement update**

WCCG.1357 Ms Roberts presented agenda item 15. She gave a brief overview of the report.

RESOLVED: That the above is noted.

### **Quality Strategy**

WCCG.1358 RESOLVED: That the strategy is noted.

### **Joint Negotiating and Consultation Committee**

WCCG.1359 RESOLVED: That the report is noted

### **Minutes of the Quality and Safety Committee**

WCCG.1360 RESOLVED: That the minutes are noted.

### **Minutes of the Commissioning Committee**

WCCG.1361 RESOLVED: That the minutes are noted.

### **Minutes of the Finance and Performance Committee**

WCCG.1362 RESOLVED: That the minutes are noted.

### **Minutes of the Health and Wellbeing Board**

WCCG.1363 RESOLVED: That the minutes are noted.

### **Any Other Business**

WCCG.1364 There were no items.

RESOLVED: That the above is noted.

### **Members of the Public/Press to address any questions to the Governing Board**

WCCG.1365 **Question**

A request was made to have all the Governing Body documents printed.



**Answer**

Dr De Rosa pointed out these are available on the web site but this will be looked into.

**Question**

Access for patients to obtain an appointment at GP practices remains difficult, are you looking into this?

**Answer**

A large amount of work is currently being carried out regarding this.

RESOLVED: That the above are noted.

**Date of Next Meeting**

WCCG.1366      The Board noted that the next meeting was due to be held on **Tuesday 9 February 2016** to commence **at 1.00 pm** and be held at Wolverhampton Science Park, Stephenson Room.

The meeting closed at 3.10 pm

Chair.....

Date .....